

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
1	Final ✓
2	Original ✓
3	0
4	0
5	0
6	0
7	0
8	0
9	0
10	0
11	0
12	1
13	1
14	1
15	1
16	1
17	1
18	1
19	1
20	1
21	✓
22	1
23	1
24	1
25	1
26	1
27	1
28	1
29	1
30	1
31	1
32	1
33	1
34	1
35	1
36	1
37	1
38	✓
39	0
40	0
41	0
42	0
43	0
44	0
45	1
46	1
47	1
48	1
49	1
50	1

Claim	Date
51	Original ✓
52	1
53	1
54	1
55	1
56	1
57	1
58	1
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Claim	Date
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149	1
150	1

If more than 150 claims or 10 actions  
staple additional sheet here

Best Available Copy